

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ROBERT IBACH, IN HIS INDIVIDUAL CAPACITY

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

8330 SCHANTZ ROAD, BREINIGSVILLE, PA 18031

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

EDWARD THOMAS KENNEDY
401 TILLAGE RD.
BREINIGSVILLE PA 18031

Number of process to be
served with this Form 285

1

Number of parties to be
served in this case

16

Check for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

SERVICE OF PROCESS TO ROBERT IBACH, TOWNSHIP MANAGER / OPERATIONS DIRECTOR
8330 SCHANTZ RD, BREINIGSVILLE, PA 18031

FILED
JUN 01 2018
KATE BARKMAN, Clerk
By JL Dep. Clerk

Fold

Signature of Attorney, Officer, Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

415-275-1244

DATE

2/5/18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

66

District to
Serve

No. 66

Signature of Authorized USMS Deputy or Clerk

M. Shelnusky

Date

4/18/18

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

BRUCE T. KOLLER, FINANCE DIR.

Address (complete only different than shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Date

5/18/18

Time

2:05

☐ am
☒ pm

Signature of U.S. Marshal or Deputy

USM Ch. Aleph

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
STEPHEN J. MARSHALL, IN HIS INDIVIDUAL CAPACITY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
37 GRIMM RD, BREINIGSVILLE, PA 18031

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW EDWARD THOMAS KENNEDY 401 TILLAGE RD. BREINIGSVILLE PA 18031	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	16
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

FILED

JUN 01 2018

KATE BARKMAN, Clerk
Dep. Clerk

Signature of Attorney other originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

415-275-1244

By DATE 2/5/18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 66	Signature of Authorized USMS Deputy or Clerk M. Shelinsky	Date 4/18/18
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

BRUCE T. KOLLER, FINANCE DIRECTOR

Address (complete only different than shown above)

8330 SCHWARTZ RD BREINIGSVILLE PA 18031

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date 5/16/18 Time 2:00 ☐ am ☒ pm

Signature of U.S. Marshal or Deputy

USM A. A. [Signature]

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
EDGARDO COLON, IN HIS INDIVIDUAL CAPACITY
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
37 GRIMM RD, BREINIGSVILLE, PA 18031

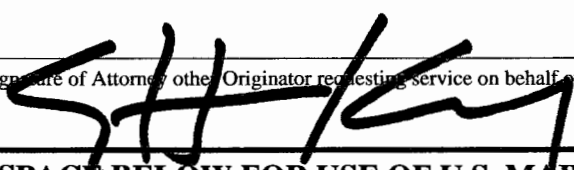
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW EDWARD THOMAS KENNEDY 401 TILLAGE RD. BREINIGSVILLE PA 18031	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	16
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Fold

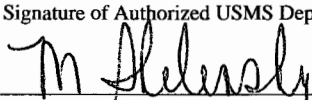
FILED

Fold

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 415-275-1244	DATE 2/5/18
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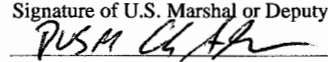
JUN 01 2018
KATE GARKIMAN, Clerk
By  Dep. Clerk

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I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 66	Signature of Authorized USMS Deputy or Clerk 	Date 4/11/18
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☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) BRUCE T. KOLLER, FINANCE DIR.	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above) 8330 SCHWARTZ RD. BREINIGSVILLE PA 18031	Date 5/18/18 Time 2:10 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy 

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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PLAINTIFF EDWARD THOMAS KENNEDY	COURT CASE NUMBER 18-977
DEFENDANT JOSEPH N. HANNA, et. al.	TYPE OF PROCESS complaint and summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

UPPER MACUNGIE TOWNSHIP

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

8330 SCHANTZ ROAD, BREINIGSVILLE, PA 18031

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

EDWARD THOMAS KENNEDY
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BREINIGSVILLE PA 18031

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SERVICE OF PROCESS TO ROBERT IBACH, TOWNSHIP MANAGER / OPERATIONS DIRECTOR
8330 SCHANTZ RD, BREINIGSVILLE, PA 18031

FILED

JUN 01 2018

KATE BARKMAN, Clerk
By *[Signature]* Dep. Clerk

Signature of Attorney or Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

415-275-1244

DATE

2/5/18

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(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

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District of
Origin

No. 66

District to
Serve

No. 66

Signature of Authorized USMS Deputy or Clerk

[Signature]

Date

4/11/18

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☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (*if not shown above*)

BRUCE T. KOLLER, FINANCE DIR.

Address (*complete only different than shown above*)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Date

5/18/18

Time

2:15

☐ am
☒ pm

Signature of U.S. Marshal or Deputy

[Signature]

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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